

DRAFT



Behavioral Health Services Mental Health Services Act Innovation Program and Expenditure Plan Update Fiscal Years 2017-18 through 2023-24

Cycle 3 proposals:

INN 16—Urban Beats

INN 17—CREST Mobile Hoarding Units

Cycle 4 proposal:

INN 18—Peripartum

Cycle 3 projects were approved by the County of San Diego Board of Supervisors and by the Mental Health Services Oversight and Accountability Commission (MHSOAC) in 2015 and are currently in operation. The proposals for Cycle 3 expand operations starting in Fiscal Year 2017-18 and extend the duration of the projects, as indicated. The update provides additional funding for expanded services. The totals provided are for the duration of the project.

The Cycle 4 proposal is a new project, pending approval from the MHSOAC. The update provides additional funding for expanded services.

Innovation Evaluation services for each Innovation program are budgeted independently from direct program costs within this proposal, as the funds are allocated to a separate provider.

Urban Beats (INN 16) Project Overview

On April 25, 2017, the Board of Supervisors approved an extension and expansion from September 1, 2017 through June 30, 2019 with a total budget of \$2,029,504. Today's Board action proposes the following changes:

Revised Extension and Expansion Term:	November 1, 2017 through June 30, 2020
Budget Increase for Extension and Expansion:	\$1,265,033 (<i>excluding evaluation costs</i>)
Revised Total Program Budget:	\$3,294,538 (<i>excluding evaluation costs</i>)

Purpose: To assist transition age youth (TAY) in engaging or investing in behavioral health services and/or identifying mental health symptoms and reducing stigma by connecting with TAY through artistic expression.

How: Delivers a customized service to youth created by TAY with a serious mental illness (SMI) and at-risk TAY who incorporate their message into TAY-friendly social media that creatively combines therapeutic, stigma reducing, cultural expression and social justice messaging. The program is intended to engage TAY in wellness activities by providing a youth-focused message created and developed by youth. These may include the visual arts, spoken word, videos, and performances.

Why: Stakeholders expressed that TAY have long been difficult to engage and retain in mental health services. This approach provides wellness activities and messaging in an innovative way that proposes to reach TAY who otherwise would remain disconnected from or prematurely leaves our system of care. Urban TAY often encounter stigma within their community regarding both accessing and maintaining behavioral health services. TAY often report feeling disconnected from traditional services and the people providing them.

Where: This program is currently being offered in the Central Region and the expansion is to include the N. Central Region and the East African Community.

Who: Transitional-Age Youth experiencing serious mental illness or are at-risk of behavioral health conditions. Proposed Clients Served Annually: 600 additional clients to be served in the North Central Region and an additional 200 to be served in the East African Community component for a new total of 1400 to be surveyed annually.

Innovative Components: This project is an adaptation to existing similar programs and it is designed to test whether a culturally sensitive program that focuses on engagement via multiple models of artistic expression is successful at engaging seriously mentally ill TAY who are currently enrolled in behavioral health programs, as well as at-risk TAY who may develop behavioral health conditions.

Proposed Change: To increase staffing by 3 FTE to expand and extend services to additional clients in the North Central region, provide a therapist on staff to provide assessment, linkage and short-term treatment, and funding to provide transportation to enhance outreach and performance venues for clients. Additionally, add a third academy track through a subcontract for the East African TAY Community.

Research Questions:

- To learn whether engaging TAY in a youth friendly and artistic manner improves outcomes by enhancing wellness, coping strategies, access to care, ILS and ability to socialize in a positive, healthy manner, while imparting a message of wellness to other TAY.
- To learn if the purposeful integration of elements of artistic expressions and culture facilitated in a therapeutic setting increases access or acceptance of services and increases the level of functioning by participating in meaningful activities.
- To evaluate alternative strategies that can be integrated into our traditional TAY service array and used to engage SMI and at-risk TAY in mental health services more consistently and effectively.
- To evaluate whether the inclusion of a therapist on staff increases connection to services.

- To evaluate if this innovative model will work with specific populations (East African TAY)

CREST Mobile Hoarding formerly IMHIP (INN 17) Project Overview

On April 25, 2017, the Board of Supervisors approved an extension and expansion from September 1, 2017 through June 30, 2020 with a total budget of \$2,518,877. Today's Board action proposes the following changes:

Revised Extension and Expansion Term:	November 1, 2017 through June 30, 2020
Budget Increase for Extension and Expansion:	\$1,303,061 <i>(excluding evaluation costs)</i>
Revised Total Program Budget:	\$3,821,936 <i>(excluding evaluation costs)</i>

Purpose: Improve health, safety and quality of life, decrease hoarding behaviors, and decrease housing instability in older adults.

How: Diminishes hoarding behaviors long term in Older Adults by combining an adapted cognitive-behavior- rehabilitation therapy with hands-on training and support. The team consists of specially-trained professionals and peers who will also collaborate with the participants other health providers. An aftercare support group helps participants maintain the skills learned. Change adds staff to serve more clients and extends one year.

Why: Hoarding is particularly dangerous for older persons, who may have physical and cognitive limitations. Basic functioning in the home may be impaired as the acquisition of items piled up in various rooms prevents the use of the rooms intended function. Hoarding can present a physical threat due to fires, falling, unsanitary conditions, and inability to prepare food. Many suffer from great social impairment due to the unwelcoming state of the home. Most Older Adults live on a fixed income and suffer from financial problems due to paying for extra storage space; purchasing unneeded items, or housing fires. Older Adults are at risk for eviction or premature relocation to less desirable housing.

Where: Residential homes of referred clients.

Who: Older adults referred for hoarding behaviors that impact daily living and risk for eviction. Current program serves 30 clients in the Central/North Central Regions. The program is expanding Countywide. Proposed Clients Served Annually: 90

Innovative Components: The mobile nature of the project increases access to services for a population of older adults who tend to be isolated and who have many times lost their social contacts and family connections due to the hoarding behaviors. There are few trained professionals that have specialized expertise in this area or are able to make house calls to coach individuals to de-clutter and/or teach them new skills to manage compulsive hoarding. This program design addresses these issues and further, provides case management, peer support, family services, collaboration with the older adult's other treatment professionals, linkage to additional community services and aftercare services.

Proposed Change: Change adds staffing to expand Countywide to serve an additional 60 clients that will better meet the cultural needs of the San Diego population and will provide Spanish/English bilingual services and to extend the current program by one and one-half years.

Research Questions:

- What is an effective model to treat hoarding behaviors in Older Adults with serious mental illness?

- What are the most effective ways to engage an Older Adult to participate in interventions geared for hoarding behaviors?
- Are peer supports and family services effective with Older Adults who have hoarding behaviors either individually and/or as part of an aftercare support group?

Peripartum (INN 18) Project Overview

On April 25, 2017, the Board of Supervisors approved this new project for a term from July 1, 2018 through December 31, 2022 with a total budget of \$2,138,750. Today's Board action proposes the following change:

Approved Budget: \$2,138,750 (*excluding evaluation costs*)

Budget Increase: \$2,396,588 (*excluding evaluation costs*)

Revised Total Program Budget: \$4,535,338 (*excluding evaluation costs*)

Purpose: To decrease negative consequences from untreated behavioral health issues for expectant and new mothers and fathers.

How: Through coordination with the Public Health Nurses Home Visiting Programs, the proposed program will support parents from underserved or unserved populations who have perinatal mood and anxiety disorders and provide treatment services and linkages to appropriate resources and care. Services are provided in partnership with Health and Human Services Agency programs that support pregnant and parenting mothers and fathers. The project will engage pregnant women, their partners, and parents with young children that have already been identified by Public Health Nurses as having need for treatment services. Priority efforts shall be made to engage underserved populations such as refugee families, Latinos and African Americans.

Why: Postpartum depression is the most common complication of childbearing, affecting approximately 10-15% of women. Emerging research has also highlighted the increased awareness of perinatal anxiety disorders, which are often co-morbid with depressive symptoms. Recent studies have also highlighted the need to assess fathers for depressive and anxiety symptoms in the prenatal and postnatal period. While literature around paternal mood and anxiety disorders is less available, studies indicate paternal postpartum depression affects between 4 and 24 percent of expectant and new fathers. The ability to identify mothers and fathers experiencing depression and anxiety symptoms, as early as possible, can markedly reduce the negative consequences for children and families that result from untreated mental health concerns. The need for increased screening, treatment and linkage to services for perinatal behavioral health issues, particularly in underserved communities, has been highlighted as a need by community members at the Community Forums and in our Children's System of Care Council.

Where: This project will work in conjunction with the Public Health Nurses (PHN) Home Visiting programs: Nurse- Family Partnership and Maternal Child Health, Countywide

Who: Pregnant women, their partners, and parents with young children that have already been screened and identified as needing behavioral health services. Proposed Clients Served Annually: 300

Innovative Components: Embedding staff with the Public Health Nursing programs will allow access to clients that are at increased risk due to the psychosocial and socioeconomic factors, known risk factors associated with perinatal mood and anxiety problems. Innovations staff will provide both treatment services and linkage to additional support, if and when necessary. Program staff will also work to identify barriers in engagement to treatment services and will inform the PHNs on how to better link and engage clients with behavioral health services. Past efforts for screening and linkage to services for perinatal mood and anxiety problems have primarily focused on the mother. This project will additionally focus on fathers due to increasing awareness of negative outcomes for children and families from paternal perinatal mood and anxiety disorders.

Research Questions:

- To learn if collaboration with the PHN Home Visiting programs is effective in engaging mothers and fathers for perinatal depression and anxiety treatment.

- To identify how to best equip the PHN in effectively connecting both mothers and fathers to services related to maternal/paternal depression or anxiety.
- To learn if embedded behavioral health staff can provide effective, short term treatment services that meet the needs of identified mothers and fathers.
- To identify barriers in mothers and fathers willingness to access treatment.
- To learn if fathers are willing to participate in engagement efforts and to better understand the characteristics of paternal symptomology.
- To evaluate the effectiveness of culturally competent referrals and the outcomes of engagement and efficacy of culturally appropriate interventions.
- To learn what percentage are linked to existing resources and identify system gaps, if any.

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